# External Evaluation of the Indian Health Service Aberdeen Area Injury Prevention Program: Final Evaluation Report – Executive Summary

Submitted by:

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Submitted to:

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This Executive Summary outlines the major findings outlined in the Aberdeen Area Injury Prevention Program (IPP) Evaluation Report completed in January 2002 by Carolyn E. Crump, PhD and Robert J. Letourneau, MPH of the University of North Carolina. Included in this Executive Summary are the Program Stage of Development ratings for the 12 Evaluation Components used to guide the evaluation process:

- 1. Mission/Vision
- 2. Resource Allocation/Accounting
- 3. Management Support
- 4. Staffing/Roles and Responsibilities
- 5. Training
- 6. Partnerships/Collaboration

- 7. Needs Assessment/Defined Service Population
- 8. Surveillance Data Collection
- 9. Injury Program Planning and Implementation
- 10. Marketing/Advocacy
- 11. Evaluation/Reporting
- 12. Technical Assistance/Building Tribal Capacity

A brief summary of recommendations is also provided in this Executive Summary for each Evaluation Component. Please refer to the full-text version of the Aberdeen Area Evaluation Report for the following: a) background on the development of the evaluation process; b) summary of the Aberdeen Area Evaluation Process; c) an overview of the Aberdeen Area IPP; d) a description of the Program Stage of Development Process; e) contextual factors used to determine stage of development ratings; f) recommendations; and f) a list of resources for Aberdeen Area IPP staff.

#### 1. Mission/Vision

Basic	Intermediate	Comprehensive

The Aberdeen Area Injury Prevention Program (IPP) is at the **Basic** stage of development for Mission/Vision. To ensure that the highest quality services are provided to Tribes in the Area, and to further enhance the stage of development for this Evaluation Component, the evaluators recommend that the Aberdeen Area IPP develop a more systematic way of program planning. This planning should be conducted annually, at a minimum, and should include the identification of goals, objectives, and activities for the injury prevention program at the Area, District, and Service Unit/Tribal level. The Area IP Specialist should also develop and distribute a set of guidelines for field staff (including Tribal staff) to follow when conducting annual injury prevention planning activities. Having a set of guidelines will provide field staff with parameters on how to develop annual program plans and priorities, as well as a framework in which to report on project activities to Tribal administrators (e.g. Service Unit Directors). These guidelines should be revised periodically and provided to new staff when they join the Aberdeen Area Injury Prevention Program. Aberdeen Area staff should consider developing plans that are based upon the 12 Evaluation Components used for this Area Evaluation. For example, Evaluation Components rated as "basic" could be the priority for the short-term (next 1-2 years) or long-term (next 3-5 years). For each Evaluation Component, staff could list objectives, action steps (with identified staff members responsible for completing), and an appropriate timeline for completing tasks. Finally, the Aberdeen Area Injury Prevention Program should conduct an annual injury prevention program staff meeting to discuss the injury prevention program, including setting program goals, objectives, and priorities.

#### 2. Resource Allocation/Accounting

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is at the **Basic** stage for Resource Allocation/Accounting. The IP Specialist did not, at the time of the October 2001 site visit, have control or significant input into the annual budget for

the Aberdeen Area Injury Prevention Program. While this changed following the site visit, the evaluators continue to encourage Area administrators to involve the Area IP Specialist in the budgetary process and to specifically identify funds for injury prevention activities. The evaluators recommend that the Aberdeen Area should increase injury prevention program staff (e.g., fund a District Injury Prevention Specialist position). This will elevate the development of the Aberdeen Area Injury Prevention Program, as the current District Environmental Health Officers/Sanitarians have responsibilities that exceed their available time and ability due to managing both Environmental Health and Injury Prevention Program responsibilities. The evaluators also encourage IHS staff training in proposal development, budget formulation, budget monitoring, and budget reporting be provided, as needed, to Aberdeen Area, District, Service Unit, and Tribal Injury Prevention Program staff. The evaluators recommend that project funding provided to Tribes be available every year and be provided to Tribes based, in part, on history of previous accomplishments and/or project evaluations. Awardees should also report the extent to which past special project funding has had measurable effects and whether the project met stated goals and objectives.

#### 3. Management Support

Basic	Intermediate	Comprehensive
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The Aberdeen Area IPP is at the **Basic** stage of development for Management Support. Success of injury prevention programs often depends on the support provided to the program from management in the Area Office and/or Tribal government. While there appears to be upper management support for the Aberdeen Area Injury Prevention Program, the creation of and funding for a District injury prevention position(s) would indicate stronger management support for the Aberdeen Area IP program. Some staff indicated that not all Service Unit Directors and/or Tribal Health Board members are "fully on board" with the injury prevention program, therefore, the evaluators suggest that additional exposure (e.g., their involvement in the IP program planning process) and discussion regarding the Aberdeen Area, District, and Service Unit/Tribal injury prevention program activities be developed for Health Directors (e.g., through training). This may benefit local injury prevention activities. It may be especially appropriate to focus attention on improving relationships with Health Directors, who do not regularly communicate with injury prevention program staff. Given the recent emphasis to have Area IP Specialist John Weaver spend more time in the Area Office as opposed to in the field, the evaluators recommend that staff continue the trend to have District Sanitarians be the 'first line' of technical assistance for local field staff conducting injury prevention. This decentralization of the management process will build local capacity.

### 4. Staffing/Roles and Responsibilities

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is between the **Basic** and **Intermediate** stage of development for Staffing/Roles and Responsibilities. To enhance this evaluation component, the Area Injury Prevention Specialist should be allowed to spend 100 percent time on injury prevention. The evaluators specifically recommend that a District Injury Prevention Specialist position be developed to serve Native Americans in the Aberdeen Area. Given the importance of injury prevention to the overall health of American Indians, it is clear that staffing decisions should be reconsidered, given that District IP positions were not initially supported by the Area in 1994. The evaluators also recommend that more comprehensive injury prevention job descriptions for District and Service Unit staff responsible for injury prevention activities be developed for the Aberdeen Area to ensure that staff in each District or Service Unit are fulfilling appropriate injury prevention responsibilities and duties. The evaluators suggest that supervisors use the annual injury

prevention workplans developed by some field staff as the basis for providing constructive feedback on injury prevention performance.

#### 5. Training

Basic Intermediate Comprehensive	Basic	Intermediate	Comprehensive
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The Aberdeen Area IPP is between the **Intermediate and Comprehensive** stage of development for Training. The Aberdeen Area Injury Prevention Program has done a commendable job providing training to IHS staff and Tribal members within and outside the Area, particularly given identified barriers to attending training courses outside the Area. Follow-up to assess the impact of training on course participants (Area-specific and National courses) should be conducted on a more regular basis in the Aberdeen Area. The evaluators recommend that a training database be developed in the Aberdeen Area and shared among all field staff as a method of conducting this recommended follow-up. The evaluators recommend that a summary of course evaluation results conducted in the Area be provided to course instructors and course participants. In addition to using national IHS IPP courses as a base for designing and implementing Aberdeen Area trainings, the evaluators encourage Aberdeen Area course instructors to review materials related to adult learning principles and practices. The evaluators believe there is an interest and value in the development of additional injury prevention training courses in the Aberdeen Area to provide education and information about injury prevention to Tribal/Service Unit decisionmakers. The evaluators suggest that as part of the annual/semi-annual Aberdeen Area planning process and at regular Aberdeen Area IPP meetings, specific training needs and priorities for IP be identified. As more Tribes receive IHS Tribal Injury Prevention Grants Program funding, the need for additional training may increase, for example: program management; program implementation; identifying resources; writing grants; and program sustainability. The evaluators recommend that additional opportunities for collaboration be developed between the Aberdeen Area IPP and United Tribes Technical College (e.g., training opportunities, internship opportunities, collaborative interventions) to promote and address the goals and objectives of the Aberdeen Area IPP mission/vision developed by all Staff.

### 6. Partnerships/Collaboration

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is between the **Basic** and **Intermediate** stage of development for Partnerships/Collaboration. From the information collected through the evaluation process, it appears that there has been an emphasis on the professional partnerships and collaborations in the Aberdeen Area. However, maintaining local coalitions has waned in recent years, particularly in the Pierre and Sioux City Districts. The evaluators suggest that Aberdeen Area, District, and Service Unit staff build on their existing relationships and expand them in ways that lead to the implementation of IP projects. Having a set of specific ideas and project proposals, perhaps outlined in the annual Aberdeen Area IP program plan, will assist Aberdeen Area and District IP staff by focusing their attention on collaborations leading to the joint implementation of specific IP interventions. Aberdeen Area IP staff also need to spend a concentrated amount of time assessing who is involved with what injury prevention activities at the Area, District, and local level to avoid duplication of injury prevention efforts and to avoid developing projects that may already be underway. Collaboration and networking between Service Unit/Tribal Sanitarians and federal agencies should be facilitated by District Sanitarians and the Area Injury Prevention Specialist. There may also be missed opportunities for collaboration on IP projects among state level organizations. In an era of diminishing resources there is much value in spending time to develop relationships and

collaborative efforts. Professionals and those representing other federal, state, and local agencies will more likely support a project if there is a clear proposal and the ideas are organized in a timeline with stated goals and objectives with the responsible parties indicated. Few Tribes in the Aberdeen Area have active Injury Prevention Committees or Coalitions. The evaluators emphasize the importance of Area, District, and Service Unit staff showing community members their commitment to developing and maintaining a coalition. The Area IP Specialist described, and the evaluators share, his philosophy on coalition development, which includes the concept that a community member or agency representative should be the one to take on the "leadership role" or chairperson of a local coalition. Service Unit Sanitarians should provide only ancillary support to the group (e.g., note taking, follow-up, agenda preparation).

### 7. Needs Assessment/Defined Service Population

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is at the **Basic** stage of development for Needs Assessment/Defined Service Population. For the Aberdeen Area to move to the next stage of development for this Evaluation Component, staff should consider developing more formal procedures to collect needs assessment data. These data, combined with injury surveillance data, can serve as the foundation from which injury prevention projects and activities are developed, implemented, and evaluated. This type of information can be collected through the use of surveys, focus groups, or one on one interviews. The evaluators recommend that this information be routinely collected as part of a structured way of developing tailored, local-level injury prevention programs in direct response to community member requests. The evaluators also recommend that staff in the Aberdeen Area consider modeling a needs assessment approach currently being conducted in the Bemidji Area through community injury prevention conferences. An easy-to-read format summarizing needs assessment data should also be developed, to serve as a tool to market or lobby for the injury prevention program (e.g., through the development of community profiles). Links between the collection of needs assessment data and annual program planning activities should also be fostered in all Service Unit/Tribes and Districts. The Aberdeen Area IPP should also consider developing a Aberdeen Area Tribal Injury Prevention Program Steering Committee to assist in identifying the Aberdeen Area IP needs (training, funding, etc.) for Tribes in North Dakota, South Dakota, Iowa, and Nebraska. Finally, the evaluators suggest that Aberdeen Area staff consider supporting one or more Photovoice projects. Photovoice is a methodology to reach, inform, and organize community members, enabling them to prioritize their concerns and discuss problems and solutions. This "needs assessment" method also promotes critical dialogue and knowledge about personal and community issues through large and small group discussions of photographs and therefore has the potential to reach policy makers. In addition to identifying community members' perceived injury prevention needs and interests, a community capacity assessment could be completed (see resources by John Kretzman and John McKnight).

#### 8. Surveillance Data Collection

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is at the **Basic** stage of development for Surveillance Data Collection. The evaluators commend the recent, revised data collection efforts beginning in the Aberdeen Area, as they will be vital to the development of the Aberdeen Area Injury Prevention Program. The evaluators encourage the Area IP Specialist to facilitate a process whereby all Aberdeen Area staff have the opportunity to comment and provide feedback on the Injury Surveillance Protocols recently developed for the Aberdeen

Area. Specifically, the development, pre-test, and roll-out of this new surveillance protocol needs to be discussed with all staff within the Area. Care should be given in describing why the new system has been developed, why it's important, and what will be expected of Service Unit and District staff in maintaining/using the new system. In addition, the Area IP Specialist should be clear in describing how local data collection contributes to larger-picture goals for the Aberdeen Area Injury Prevention Program (e.g., request for additional staff, documenting the need for additional funding for projects, necessitating the need for additional IP training activities in the Area, advocacy purposes). Area and District staff should be responsible for providing appropriate, effective, and efficient technical assistance to field staff following the complete implementation of the data collection system/protocols. This will likely require on-site meetings/trainings and follow-up in the first few years to address ongoing problems identified with the protocols. In addition, the evaluators suggest that Service Unit staff should standardize observational protocols to provide valid estimates of usage rates (e.g., carseat, seatbelt) among Service Unit populations. The evaluators recommend that eventually staff in the Aberdeen Area receive training in the use of advanced computer systems such as GIS. Once training has been provided, instructions and protocols in the use of GIS could be added to Injury Surveillance Protocols developed for use by individual Service Units. The evaluators recommend that the Area IP Specialist and District Sanitarians offer assistance to Service Unit Staff with the development of data reports on an annual basis to summarize the information collected about injury prevention surveillance and activities. In general, the importance of data collection and reporting should be stated to decision makers and when possible, the degree to which data are provided that show specific District, Service Unit, or Tribal information should be indicated. These reports should be presented on a District and Service Unit/Tribal level to compare and contrast injury data and issues across the Aberdeen Area.

### 9. Injury Program Planning and Implementation

<b>Basic</b> Intermediate	Comprehensive
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The Aberdeen Area IPP is at the **Basic** stage of development for Injury Program Planning and Implementation. To increase the effectiveness of the Aberdeen Area injury prevention program activities, the evaluators encourage the staff to support a greater percentage of multiple levels of intervention (e.g., individual, vehicle/vector and environmental change) and should use multiple methods (e.g., health education, engineering, policy development, and enforcement). To move to a higher level for Injury Program Planning and Implementation, the evaluators recommend that Aberdeen Area staff develop a strategic approach to reduce injury related morbidity and mortality in the Aberdeen Area by specifically incorporating the four types of interventions outlined in the IOM's *Reducing the Burden of Injury Report* (Bonnie et al., 1999): 1) Changing individual behavior; 2) Modifying products or agents of injury; 3) Modifying the physical environment; and 4) Modifying the sociocultural and economic environment. While Aberdeen Area IPP staff are not expected to take full responsibility for preventing intentional injuries, EH Staff contributions may be significant. It seems an appropriate issue to address through collaborative relationships with IHS Area departments and other organizations with responsibility for alcohol abuse prevention/treatment and mental health.

#### 10. Marketing

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is at the **Basic** stage of development for Marketing. Injury prevention marketing activities are limited in the Aberdeen Area. Developing a 1-page Aberdeen Area Injury Prevention

Program Summary would be an excellent start at summarizing the IPP's main activities. In addition to this summary, the evaluators suggest that future marketing tools, such as Aberdeen Area Fact Sheet, be developed to correspond to major program emphasis areas of the program at the Area-level as well as District and/or Service Unit-levels. All materials developed to market the Area's program should be updated and distributed annually to the Area's list of Aberdeen Area injury prevention practitioners or partners. The distribution of such marketing materials could coincide with materials distributed as part of the annual program planning process, to highlight activities completed in the previous year or years. The formation of a Aberdeen Area-specific Injury Prevention Program webpage for the Aberdeen Area Injury Prevention Program would also be beneficial and could become part of the IHS national Injury Prevention Program website. This would serve as an innovative tool to market the injury prevention program, especially considering how quickly some Tribes are advancing their computer and communication technologies. Information on the site, updated regularly, could include: training course opportunities, newsletters, data cluster maps, injury costs by fiscal year, other injury data, and IP contacts. To avoid duplication of effort, Aberdeen Area staff should consider including information on the Website that have already been created to promote the program through other channels. For example, if the recommendation is followed to create an Aberdeen 1-page Program Summary or Fact Sheets as described above, then this same information could be included on the Website.

#### 11. Evaluation/Reporting

Basic	Intermediate	Comprehensive

The Aberdeen Area IPP is at the **Basic** stage of Development for Evaluation/Reporting. For the Aberdeen Area Injury Prevention Program to advance to the next stage of development for this Evaluation Component, more formal evaluation and reporting mechanisms should be put in place to monitor future injury prevention demonstration projects implemented by the Area or District/Service Unit. The reporting requirements used to date among Area, District, and Service Unit staff are not sufficient to capture quality information (relating to process or impact evaluation) about the projects being implemented in the Aberdeen Area. In addition, the Area IP Specialist could not provide the evaluators with copies of previous final reports completed by funded projects. This indicates strongly that more evaluation and reporting of project activities, particularly those funded by the Area Office, should be encouraged. The evaluators recognize that District Sanitarians do not have the authority to report on Service Unit Sanitarian activities. This should not limit them, however, from at least annually documenting the accomplishments of those Service Units who do not send in their reports. Developing a more effective reporting system, with participation from all field staff, will facilitate information sharing and networking among staff within the Aberdeen Area. Initiating a new reporting system that is consistent with the goals and objectives outlined in an Aberdeen Area Injury Prevention Program Mission/Vision may benefit all staff. Alternatively, a report preparation workshop could be developed to instruct Tribal representatives and Service Unit staff in methods needed to collect and summarize information regarding intervention projects. Documenting successes as well as challenges, including a report of how funds were allotted, will improve program planning at the Area, District, and Service Unit Levels. As a means to justify requests for additional resources to support intervention projects, the evaluators strongly recommend that appropriate training on evaluation strategies, methods, and techniques be provided to as many Area, District, Service Unit, and Tribal staff as possible. The Aberdeen Area IP program should consider developing a specific in-service evaluation training workshop for all staff.

#### 12. Technical Assistance/Building Tribal Capacity

Basic Intermediate Comprehensiv	<u>;</u>
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The Aberdeen Area IPP is between the **Basic** and **Intermediate** stage of development for Technical Assistance/Building Tribal Capacity. With the advent of the IHS Tribal Injury Prevention Grants Program funding to Tribes, it is important for Aberdeen Area, District, and Service Unit Office IP staff to provide technical assistance to all Tribal Organizations in the Aberdeen Area interested in working to prevent injuries and/or to submit proposals for grant funding, particularly those in South Dakota, Iowa, and Nebraska. The degree to which Tribes in the Aberdeen Area have successfully competed for and been awarded grants from IHS Headquarters IPP indicates that Tribal capacity building is an important part of the Aberdeen Area Injury Prevention Program. With the advent of these and other grant funding opportunities, Aberdeen Area, District, and Service Unit/Tribal IP staff need to be prepared to provide effective and useful technical assistance to Tribes. Establishing an Aberdeen Area Tribal Injury Prevention Advisory Committee may also raise awareness of the importance of injury prevention. A Tribal IP Advisory Committee could establish relationships with State and Regional programs that address specific issues important to the safety of Tribal members (e.g., domestic violence, crime prevention).

In summary, the Aberdeen Area Injury Prevention Program is at the following Stages of Development for the 12 Evaluation Components used to guide the Evaluation:

<b>Evaluation Component</b>	Stage of Development		
1. Mission/Vision	Basic	Intermediate	Comprehensive
2. Resource Allocation/Accounting	Basic	Intermediate	Comprehensive
3. Management Support	Basic	Intermediate	Comprehensive
4. Staffing/Roles & Responsibilities	Basic	Intermediate	Comprehensive
5. Training	Basic	Intermediate	Comprehensive
6. Partnerships/Collaboration	Basic	Intermediate	Comprehensive
7. Needs Assessment/Defined Service Population	Basic	Intermediate	Comprehensive
8. Surveillance Data Collection	Basic	Intermediate	Comprehensive
9. Injury Program Planning and Implementation	Basic	Intermediate	Comprehensive
10. Marketing/Advocacy	Basic	Intermediate	Comprehensive
11. Evaluation/Reporting	Basic	Intermediate	Comprehensive
12. Technical Assistance/Building Tribal Capacity	Basic	Intermediate	Comprehensive

Aberdeen Area Injury Prevention Program staff should use the results, recommendations, and resources provided in this report to develop an Action Plan to enhance the stages of development for each Evaluation Component used in this assessment process.